SERIAL NO. FILING DATE APPLICANT(S) **CLAIMS ONLY** CLAIMS AFTER 1st AMENDMENT AFTER AS FILED 2nd AMENDMENT IND. IND. DEP. IND. IND. DEP. DEP. DEP. IND. DEP. IND. DEP. TOTAL IND. TOTAL []

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

TOTAL DEP.

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